

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>VoteVets</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00418897	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>76 Words</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 24 / 2020</b>		
Mailing Address 926 N St Rear, NW Studio #3			Amount <b>9916.00</b>		
City Washington	State DC	Zip Code 20001-4485	Transaction ID : <b>500063211</b>		
Purpose of Expenditure TV Advertising Production		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 24 / 2020</b>		
Name of Federal Candidate BUTTIGIEG, PETE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Kate Nelson Media, LLC</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 24 / 2020</b>		
Mailing Address 5812 Pratt Ct			Amount <b>600525.00</b>		
City Alexandria	State VA	Zip Code 22310-1842	Transaction ID : <b>500063213</b>		
Purpose of Expenditure TV Advertising Buy		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 23 / 2020</b>		
Name of Federal Candidate BUTTIGIEG, PETE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>610441.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	<b>610441.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hegdahl, Rick, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**01 / 25 / 2020**

Signature